

MASTER SERVICE AGREEMENT TABLE - UPDATE FORM

FORM COMPLETION INSTRUCTION

The instructions below specify how to complete the Department Specific Master Service Agreement update form for data entry and approval by the Procurement Unit in the Office of the Comptroller (CTR). Fields 1-9 & 25-27 are required to establish a department specific MSA Table (MSER). When adding a vendor to an MSA table, fields 10-24 are also required, and an executed contract (on the form specified by the applicable regulations) must be attached to the completed MSA Table Update Form before submitting to CTR.

(1) ACTION

Required. Enter one of the following codes:

E = Original entry; or

M = Modification to a previously entered form.

(2) DEPARTMENT

Required. Enter the name (3 Character field) of the department preparing this form.

(3) MSA NUMBER

Required. Department specific Master Service Agreement number is a 7 character field and it is made up of the 3 character (alpha) MMARS department code, the three digit object code that the MSA is classified under and a sequential number (a department may have several MSA's in one object code such as: DPHM031 and DPHM032). EXAMPLE: an MSA # for the Office of the Comptroller, for Accountants in the HH subsidiary would be entered as CTR H011.

(4) OBJECT

Required. Enter the appropriate three-position object code for this MSA. Must match what is in MSA#. (Refer to the Expenditure Classification Handbook for specific information).

6/5/92

(5) **TITLE**

Required. Enter name or description that specifies the purpose of this MSA. Limited to 30 characters.

(6) **TEXT INDICATOR**

Optional. "Y" if text is attached (may be used to list vendors alphabetically) and "N" if no text is needed. For data entry purposes the "Y" will be system generated when the MSTX screen is entered.

(7) **MSA START DATE**

Required. Enter the start date of the MSA in a month-day-year format e.g. July 1, 1992 is entered as 07-01-92.

(8) **MSA END DATE**

Required. Enter the end date of the MSA in a month-day-year format e.g. June 30, 1993 is entered as 06-30-93.

(9) **CHANGE DATE INDICATOR**

Optional. May be used when the MSA end date is changed (extended or shortened). When an MSA is extended a "Y" indicates that the *rate end dates* which equal the MSA end date are to be changed to agree with the new MSA end date. If the MSA end date is shortened a "Y" indicates, *rate end dates* that exceed the new MSA end date are to be changed to agree with the new MSA end date. (Even if left blank).

(10) **MSA NUMBER**

Required. Enter the MSA number specified in item #3 above.

(11) **VENDOR CODE**

Required. Enter the vendor identification number as reflected on the VEND table for a vendor entry onto the MSA table.

(12) VENDOR NAME

Required. Enter vendor's name on the form. (The name will be system generated from the VEND table when data entered by CTR).

(13) VENDOR ADDRESS

Optional. This will be system generated from the VEND table.

(14) BUSINESS ADDRESS

Optional. Enter business address if your department or the vendor requires the use of a business address. 30 Character field.

(15) LINE

Required. Enter a different two-digit number for each line on the form. e.g. 01, 02, 03, etc.

(16) REGION

Required. Enter a two-digit or two alpha code to specify department defined regional classification e.g. 10 = northern region, 11 = southern region, 12 = eastern region, 13 = western region, 14 =statewide; or NO = northern region, SO = southern region, etc. 2 Character field.

(17) SERVICE CODE

Optional. Enter the appropriate 4 digit code from the Service Code Table (SERV) if service code is required by your department. 4 Character field.

(18) SERVICE DESCRIPTION

Required. Describe the service. 30 Character field.

(19) SERVICE UNIT

Required. Enter one of the units of measure (4 Character field) from the Unit of Service Table (SERU) on MMARS such as:

DAYS = Daily	LECT = Lecture
HOURLY = Hourly	EXAM = Examination, etc.
WEEK = Weekly	VARB = (for use when Rate is variable), etc.
MONTH = Monthly	

(20) RATE

Required. Enter the approved negotiated rate. If the rate can not be determined and/or it is variable then write the word "VAR" in the rate field. 14 Character field.

(21) PROGRAM CODE

Optional. Enter 4 digit program code from the program code table on MMARS if your department instructs you to enter this information. Refer to the Program Table (PROG) for a list of valid program codes.

(22) PROG NUMBER

Optional. Enter the program number as defined by your department. 4 Character field.

(23) RATE START DATE

Required. Enter the start date of the rate on this line which should be within the MSA start dates and end dates specified on items #7 and #8 above.

(24) RATE END DATE

Required. Enter the end date of the rate on this line which should be within the MSA start and end dates as specified on items #7 and #8 above.

(25) PREPARED BY

Required. Must be signed by the person preparing this form. Include the job title of the person preparing it and the date on which the form is prepared.

(26) APPROVED BY

Required. Must be signed by an authorized signatory of the department. Include the job title of the person approving this MSA and the date on which the form is signed.

(27) PHONE NUMBER

Required. Write the phone number of an employee who will be responsible for answering any questions regarding your department MSA's.

(28) ENTERED AT CTR BY

For Comptroller use only. This field will be completed by the Office of the Comptroller after the MSA is data entered in MMARS.